



# CITY OF BURBANK RECYCLE CENTER PRIVATE HAULER CONTRACTOR PERMIT / LICENSE APPLICATION

500 S. Flower Street ■ Burbank CA 91502-2106  
818-238-3900 Phone ■ 818-238-3908 Facsimile ■ [www.burbankrecycle.org](http://www.burbankrecycle.org)

## SECTION I. GENERAL INFORMATION

|                                  |  |
|----------------------------------|--|
| Company Name:                    |  |
| Street Address:                  |  |
| Mailing Address:                 |  |
| Phone Number:                    |  |
| Fax Number:                      |  |
| Email Address:                   |  |
| Contact Person:                  |  |
| Burbank Business License Number: |  |

Is the service company owned by a "parent" or "umbrella" company? If so, please indicate company name, address, phone number, and contact person:

|  |
|--|
|  |
|  |

## SECTION II. SCHEDULE AND ROUTE INFORMATION

|  |                        |
|--|------------------------|
| Service Description/Rates:<br>(attach rate sheet if necessary) |                        |
| Days of Route Schedules:                                       |                        |
| Holiday Schedules:   |                        |
| Destination/disposal site locations of:                        | all recyclables:       |
|  | all greenwaste:        |
|  | all other solid waste: |

## SECTION III. CUSTOMER INFORMATION

|  |  |
|--|--|
| Total number of Burbank customers serviced by regular solid waste collection:                                  |  |
| Number of vehicles operating in Burbank (provide vehicle license numbers; use separate sheet)                  |  |
| Estimated annual Burbank tonnage of solid waste collected:   |  |
| Estimated annual Burbank tonnage of recyclables collected:   |  |
| Number of Burbank multi-residential complexes participating in recycling/greenwaste programs:                  |  |
| Number of Burbank commercial/industrial/institutional entities participating in recycling/greenwaste programs: |  |

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Please provide the vehicle license numbers of all the vehicles you operate in Burbank.

| Vehicle License Number | Vehicle License Number | Vehicle License Number |
|------------------------|------------------------|------------------------|
|                        |                        |                        |
|                        |                        |                        |
|                        |                        |                        |
|                        |                        |                        |
|                        |                        |                        |
|                        |                        |                        |

(please provide separate list if more space is needed)

*Total number of vehicles* \_\_\_\_\_ *x \$81.82 = \$* \_\_\_\_\_ *Private Hauler Contractor License Fee Due*

**All Waste Collectors Operating and / or Located in the City of Burbank Agree to Indemnify and Hold the City of Burbank Harmless from any Liability including Liability under the Comprehensive Environmental Response Compensation and Liability Act (CERCLA).**

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Return To:     **Burbank Recycle Center  
500 South Flower Street  
Burbank CA 91502**

| TO BE COMPLETED BY PUBLIC WORKS ADMINISTRATION ONLY                      |   |
|--|---|
| APPLICATION APPROVED:  | <input type="checkbox"/> YES <span style="margin-left: 100px;"><input type="checkbox"/> NO</span> |
| IF NOT APPROVED, GROUNDS FOR REJECTION: _____                            |   |
| _____  |   |
| _____  |   |
| _____<br><b>Kreigh Hampel, Recycling Coordinator, for Bonnie Teaford</b> | _____<br><b>Date</b>  |